

COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
James Deloach
Maple Carr. Fac.
P.O. Box 1107
E/mon, AL 36025

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X C Bell
☒ Agent
☐ Addressee

B. Received by (Printed Name)
C Bell

C. Date of Delivery
10/7/05

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No
2:05 CV 935-7
Proc + Return

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7004 2510 0001 0150 3012